

LINDA LINGLE  
GOVERNOR



DENISE M. WISE  
EXECUTIVE DIRECTOR

STATE OF HAWAII  
DEPARTMENT OF HUMAN SERVICES  
HAWAII PUBLIC HOUSING AUTHORITY  
1002 NORTH SCHOOL STREET  
POST OFFICE BOX 17907  
Honolulu, Hawaii 96817

BARBARA E. ARASHIRO  
EXECUTIVE ASSISTANT  
IN REPLY PLEASE REFER TO:  
10:CPO/268

September 20, 2010

TO: Interested Parties

FROM: Rick T. Sogawa   
Acting Procurement Officer

SUBJECT: Invitation for Bids, No. PMB-2010-17, Addendum No. 1

This Addendum No. 1 is to: 1) provide additional information and clarification and 2) provide responses to questions that were received at the Pre-Proposal Conference conducted by the Hawaii Public Housing Authority (HPHA) on September 15, 2010, up until September 16, 2010:

1. As additional information, a copy of the Pre-Proposal Conference sign-in sheet conducted by the HPHA on Wednesday, August 25, 2010 is provided as Attachment 1.
2. As additional information, pages 1 and 2 of the Bid Offer Form are included as Attachment 2.
3. **Delete:** Section 2, Specifications, Technical Specifications for Electric Refrigerators, item 4.o., page 28: "Each refrigerator shall be furnished with a minimum of two (2) standard ice trays.

For clarification, **replace** with: "Each refrigerator shall be furnished with a minimum of one (1) standard ice tray.

Questions:

1. **Can the cubic feet be slightly less than the actual 18 cubic ft? Example: Various manufacturer's label their 18 cubic refrigerators as "18 cubic" but the total cubic feet could be 17.6 c.f. or 17.8 c.f., is it acceptable or it has to be the actual cubic feet or larger?**

As indicated in Section 2, Specifications, Technical Specifications for Electric Refrigerators, item 2. Width, Height, Depth, and Size, page 26, "Actual cubic feet dimensions may be plus two (2) c.f. for the 14 c.f. models and plus three (3) c.f. for the 18 c.f. models more than the nominal size specified.

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If you have any questions, please call contact Rick Sogawa, IFB Coordinator at (808) 832-6038. Thank you for your attention to this matter.



**SIGN-IN SHEET**  
**IFB PMB-2010-17**  
**Provision of Refrigerators - Statewide**

September 15, 2010  
 9:00 a.m.  
 HPHA - Building E Conference Room

Name	Company	Mailing/Email Address	Contact #	Fax #
James Chong	ABC A/C & Refrig	jamesabc.airefrig@hawaiiintel.net	808-741-8020	848-2142
Paul Masuoka	Pacific Appliance Group	pmasuoka@hawaii.rr.com	841-3322	853-2244
Rick Sawyer	HP Hts	1002 N. School St Hon, HI 96822 rick.sawyer@hp.com	832-6038	832-6035
Earl Nakagawa	HP Hts	1002 N. School St Hon, HI 96817	832-4684	

IFB-PMB-2010-17

SEALED BID

Hawaii Public Housing Authority  
Procurement Office  
1002 North School Street, Bldg. "D"  
Honolulu, Hawaii 96817

Dear Procurement Officer:

The undersigned has carefully read and understands the terms and conditions specified in the Sealed Invitation for Bid, Specifications and the General Conditions by reference made a part of this Bid and hereby submits the following offer to perform the work specified.

That the undersigned further understands and agrees that by submitting this Sealed Bid, 1) it is declaring its Bid is not in violation of Chapter 84, Hawaii Revised Statutes, concerning prohibited State contracts, and 2) it is certifying that the price(s) submitted was (were) independently arrived at without collusion.

Date: \_\_\_\_\_

Respectfully Submitted,

Telephone No.: \_\_\_\_\_

\_\_\_\_\_  
*Legal Name of Offeror*

Fax No.: \_\_\_\_\_

Payment address, if other than street  
address at right:

\_\_\_\_\_  
*Authorized Signature (Original)*

\_\_\_\_\_  
Hawaii General Excise Tax Lic. I.D. No.:

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
Social Security or Federal I.D. No.:

\_\_\_\_\_  
*Street Address*

\_\_\_\_\_  
*City, State, Zip Code*

Offeror is:    ☐ Individual    ☐ Partnership    ☐ Corporation    ☐ Joint Venture

State of Incorporation:    ☐ Hawaii    \* ☐ Other \_\_\_\_\_

\*If "other", is corporate seal available in Hawaii?    ☐ Yes    ☐ No

1. All interested bidders must complete the following items:

- 2a. Give the history of the interested bidder's experience in the operation of appliance services or similar businesses in the State of Hawaii. Include the number of years of experience: (Attach separate pages if necessary.)

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- 2b. Give the names and addresses of companies or government agencies at which the interested bidder has provided or is currently providing appliance services mentioned in Question 2a, together with the dates of services:

Firm or Agency	Contact Person	Telephone No.	Dates of Service

4. Insurance coverage to be provided by:

Commercial General Liability: \_\_\_\_\_

Name of Agent: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Workers Comp: \_\_\_\_\_

Automobile Insurance: \_\_\_\_\_

Signature of Offeror \_\_\_\_\_